

### III. CHILD AND FAMILY WELL-BEING

#### Well-Being Outcome 1

<b>Outcome WB1: Families have enhanced capacity to provide for their children's needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Jackson County</b>	<b>Jasper County</b>	<b>St. Louis County</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	7	10	4	21	42.0
Partially Achieved:	10	2	4	16	32.0
Not Achieved or Addressed:	7	0	6	13	26.0
Not Applicable:	0	0	0		

#### STATUS OF WELL-BEING OUTCOME 1

Missouri did not achieve substantial conformity with Well-Being Outcome 1. This determination was based on the finding that the outcome was rated as substantially achieved in 42.0 percent of the cases reviewed, which is less than the 90 percent required for substantial conformity.

Performance on this outcome varied across CFSR sites. The outcome was determined to be substantially achieved in 83 percent of Jasper County cases, compared to 29 percent of Jackson County and St. Louis County cases.

A key CFSR finding is that all indicators for Well-Being Outcome 1 were rated as an Area Needing Improvement. Case reviews found that CD was not consistent in its efforts to assess children and families for services and provide necessary services, involve

parents and children in the case planning process, and establish sufficient face-to-face contact between agency children's service workers and the children and parents in their caseloads.

Findings pertaining to the specific items assessed under Well-Being Outcome 1 are presented and discussed below.

#### **Item 17. Needs and services of child, parents, foster parents**

☐ Strength      ☒ Area Needing Improvement

**Review Findings:** An assessment of item 17 was applicable for all 50 cases. In assessing this item, reviewers were to determine whether the agency had (1) adequately assessed the needs of children, parents, and foster parents; and (2) provided the services necessary to meet those needs. The results were the following:

- Item 17 was rated as a Strength in 27 (54%) of the 50 applicable cases (15 of the 27 cases were foster care cases).
- Item 17 was rated as an Area Needing Improvement in 23 (46%) of the 50 applicable cases (11 of the 23 cases were foster care cases).

Ratings for item 17 did not differ substantively by type of case (i.e., foster care or in-home services case). Item ratings did vary considerably across CFSR sites. The item was rated as a Strength in 100 percent of Jasper County cases, compared to 42 percent of Jackson County cases and 36 percent of St. Louis County cases.

Item 17 was rated as a Strength when reviewers determined that CD had made diligent efforts to (1) assess the needs of children, parents, and foster parents, and (2) provide appropriate services to meet identified needs. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Children's needs were not assessed (10 of 50 applicable cases, 1 of which was a foster care case).
- Mother's needs were not assessed (11 of 45 applicable cases, 4 of which were foster care cases).
- Father's needs were not assessed (16 of 35 applicable cases, 5 of which were foster care cases).
- Needed services were not provided to children (14 of 50 applicable cases, 5 of which were foster care cases).
- Needed services were not provided to mothers (11 of 45 applicable cases, 3 of which were foster care cases).
- Needed services were not provided to fathers (11 of 35 applicable cases, 4 of which were foster care cases).
- Needed services were not provided to foster parents (6 of 20 applicable cases).

Most stakeholders commenting on this item during the onsite CFSR suggested that CD is effective in assessing needs and identifying services, but that accessing services often is problematic. Stakeholders reported that funding for services is insufficient to meet the need and that recent budget decreases have resulted in increased difficulty accessing services for families. Several stakeholders reported that services are not funded even when they are court ordered.

***Determination and Discussion:*** Item 17 was assigned an overall rating of Area Needing Improvement because in 46 percent of the cases, reviewers determined that CD had not adequately assessed and/or addressed the service needs of children, parents, and foster parents. A key concern pertained to the lack of assessment and service provision to fathers. The father's needs were not assessed in 46 percent of the applicable cases, and services were not provided to address identified service needs in 31 percent of the cases. However, a large percentage of mothers and children also were not assessed for service needs and did not receive services.

According to the Statewide Assessment, for intact families, Missouri policy requires an initial assessment of the family to be completed within 30 days of receipt of a Hotline referral. If the case is open longer than 30 days, a more in-depth assessment is completed on the family, and tools, including the eco-map, genogram, and timelines, are completed. As indicated in the Statewide Assessment, the comprehensive information gathered drives the development of the Family Plan for Change. This plan is reviewed by supervisors monthly and revised every 90 days. For children in out-of-home care, the needs of parents and children are assessed at the time of the initial 72-hour Family Support Team (FST) meeting and ongoing assessments occur every 30 days thereafter until adjudication. FSTs continue to be held every 6 months after adjudication.

#### **Item 18. Child and family involvement in case planning**

☐ Strength      ☒ Area Needing Improvement

***Review Findings:*** An assessment of item 18 was applicable for all 50 cases. In assessing this item, reviewers were to determine whether parents (including pre-adoptive parents or permanent caregivers) and children (if age-appropriate) had been involved in the case planning, and if not, whether their involvement was contrary to the child's best interest. A determination of involvement in case planning required that a parent or child had actively participated in identifying the services and goals included in the case plan. This assessment produced the following findings:

- Item 18 was rated as a Strength in 28 (56%) of the 50 applicable cases (16 of the 28 cases were foster care cases).
- Item 18 was rated as an Area Needing Improvement in 22 (44%) of the 50 applicable cases (10 of the 22 cases were foster care cases).

Ratings for this item varied by type of case, with the item rated as a Strength in 61 percent of foster care cases compared to 50 percent of in-home services cases. Ratings also differed across CFSR sites. The item was rated as a Strength in 100 percent of Jasper County cases, compared to 43 percent of St. Louis County cases and 42 percent of Jackson County cases.

Item 18 was rated as a Strength when reviewers determined that all appropriate parties had actively participated in the case planning process. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Fathers who should have been involved in case planning were not involved (16 [46%] of 35 applicable cases).
- Mothers who should have been involved in case planning were not involved (15 [35%] of 43 applicable cases).
- Children who were old enough to have been involved in case planning were not involved (12 [39%] of 31 applicable cases).

The opinions of stakeholders commenting on this item during the onsite CFSR differed across sites. Jasper County stakeholders reported that parents are routinely involved in the case planning process. State-level stakeholders expressed the opinion that parents are involved in case planning in the foster care cases, but not in the in-home services cases (intact cases). St. Louis County and Jackson County stakeholders suggested that the extent of involvement of parents in case planning depends on the skills and experience of the children's service workers.

All stakeholders were in agreement that the FST meetings are an effective vehicle for engaging parents and children in case planning. However, some stakeholders suggested that although children frequently attend the FST meetings, they are not always given the opportunity to speak at those meetings, even when they are older. Stakeholders also noted that while all parents are invited to attend FST meetings, they often do not perceive that their issues or concerns are heard or incorporated into the planning process.

***Determination and Discussion:*** Item 18 was assigned an overall rating of Area Needing Improvement based on the finding that in 44 percent of the cases, reviewers determined that CD had not made diligent efforts to involve parents and/or children in the case planning process. A key concern pertained to the lack of involvement of fathers in case planning, although more than one-third of the mothers and eligible children also were not involved in the case planning process.

According to the Statewide Assessment, the State recognizes that only limited efforts are made to reach out to families to fully engage them in the case planning process and encourage them to attend FST meetings. The Statewide Assessment also notes that case plans are not always developed in conjunction with the families. Information in the Statewide Assessment indicates improvement in this area, however. State Practice Development Reviews found that in State FY 1999, 69 percent of children and families were active participants in case planning, while in State FY 2002, 79 percent of children and families actively participated in case planning.

## Item 19. Caseworker visits with child

\_\_\_\_ Strength      \_\_X\_\_ Area Needing Improvement

**Review Findings:** All 50 cases were applicable for an assessment of item 19. In conducting this assessment, reviewers were to determine whether the frequency of visits between the children's service workers and children was sufficient to ensure adequate monitoring of the child's safety and well-being and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment were the following:

- Item 19 was rated as a Strength in 31 (62%) of the 50 applicable cases (18 of the 31 cases were foster care cases).
- Item 19 was rated as an Area Needing Improvement in 19 (38%) of the 50 applicable cases (8 of the 19 cases were foster care cases).

Ratings for this item differed somewhat by type of case. The item was rated as a Strength in 69 percent of the foster care cases compared to 54 percent of the in-home services cases. Ratings also differed across CFSR sites. The item was rated as a Strength in 83 percent of Jasper County cases, compared to 62.5 percent of Jackson County cases and 43 percent of St. Louis County cases.

Reviewers noted the following with respect to frequency of children's service workers' face-to-face visits with children in the 26 foster care cases:

- In 1 case, visits typically occurred once a week.
- In 7 cases, visits typically occurred twice a month.
- In 11 cases, visits typically occurred once a month.
- In 7 cases, visits typically occurred less frequently than once a month.

Reviewers noted the following with respect to frequency of children's service workers' face-to-face visits with children in the 24 in-home services cases:

- In 2 cases, visits typically occurred twice a month.
- In 17 cases, visits typically occurred once a month.
- In 5 cases, visits typically occurred less frequently than once a month.

Item 19 was rated as a Strength when reviewers determined that the frequency and quality of visits between children's service workers and children were sufficient to ensure adequate monitoring of the child's safety and well-being and promote attainment of case goals.

The item was rated as an Area Needing Improvement when reviewers determined the following:

- The frequency of social worker visits was not sufficient to meet the needs of the child and when visits did occur, they did not focus on issues pertinent to case planning, service delivery, and goal attainment (12 cases).
- The frequency of social worker visits was not sufficient to meet the needs of the child, but when visits did occur, they focused on issues pertinent to case planning, service delivery, and goal attainment (2 cases).
- The frequency of social worker visits was sufficient to meet the needs of the child, but the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (5 cases).

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the level of face-to-face contact between children's service workers and the children in their caseloads is not sufficient to ensure children's safety and well being and promote case goals, particularly for children in the in-home services cases. Stakeholders voiced concern about the lack of caseworker contact with children whose families are receiving services while the children remain in their homes. They noted that these children's service workers have too many cases to permit sufficient face-to-face contact with the children, and that children's service workers tend to make a lot of visits in a few cases and no visits in other cases. Jasper County stakeholders suggested that children's service workers need to visit children more often in their homes or foster homes.

***Determination and Discussion:*** Item 19 was assigned an overall rating of Area Needing Improvement based on the finding that in 38 percent of the cases, reviewers determined that caseworker visits with children were not of sufficient frequency and/or quality to ensure children's safety and promote attainment of case goals.

According to the Statewide Assessment, for intact families, the frequency of in-person contact is based on the level of risk and the Family Plan for Change. However, CD children's service workers are required to have face-to-face contact with the child in the home at least once every 30 days. Missouri's Peer Record Review results indicate that the mandated frequency of worker visits with intact families occurred 82 percent of the time during the fourth quarter of 2002.

The Statewide Assessment also notes that for out-of-home care cases, the CD worker is required to meet face-to-face with children once every 2 weeks, not including supervised visitation with siblings or other family members. In Jackson County, the Consent Decree mandates that weekly contact with the child occur for the first 8 weeks of any new placement. After the first 8 weeks, the CD worker must have twice a month, face-to-face contact with the child. The CFSR case reviews indicate that for the foster care cases, many children's service workers are not adhering to State policy with regard to the required face-to-face contact with children every 2 weeks. Information in the Statewide Assessment notes that key barriers preventing more frequent worker contacts with the child are large caseloads and high turnover rates.

## Item 20. Caseworker visits with parents

\_\_\_\_ Strength      \_\_X\_\_ Area Needing Improvement

**Review Findings:** An assessment of item 20 was applicable for 47 cases. Cases were not applicable for assessment if parents were no longer involved in the lives of their children despite agency efforts to involve them. Reviewers were to assess whether the worker's face-to-face contact with the children's mothers and fathers (including pre-adoptive mothers and fathers) was of sufficient frequency and quality to promote attainment of case goals and/or ensure the children's safety and well being. The results of this assessment were the following:

- Item 20 was rated as a Strength in 27 (57%) of the 47 cases (14 of the 27 cases were foster care cases).
- Item 20 was rated as an Area Needing Improvement in 20 (43%) of the 47 cases (9 of the 20 cases were foster care cases).

Ratings for this item did not differ substantively by type of case. The item was rated as a Strength in 61 percent of the foster care cases, compared to 54 percent of the in-home services cases. However, ratings for the item did vary across CFSR sites. The item was rated as a Strength in 82 percent of Jasper County cases, compared to 54 percent of St. Louis County cases and 48 percent of Jackson County cases.

Typical patterns of social worker visits with mothers (including pre-adoptive mothers) were the following (42 applicable cases):

- Weekly visits – 3 cases (all of which were foster care cases).
- Twice a month visits - 3 cases (none of which were foster care cases).
- Monthly visits – 22 cases (7 of which were foster care cases).
- Less than monthly visits – 13 cases (7 of which were foster care cases).
- No visits – 1 case (which was a foster care case).

Typical patterns of social worker visits with fathers (including pre-adoptive fathers) were the following (30 applicable cases):

- Monthly visits - 13 cases (4 of which were foster care cases).
- Less than monthly visits – 10 cases (6 of which were foster care cases).
- No visits – 7 cases (3 of which were foster care cases).

Item 20 was rated as a Strength when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment. The item was rated as an Area Needing Improvement when reviewers determined the following:

- Caseworker visits with parents were not occurring with sufficient frequency, and even when they did occur, they did not focus on substantive issues pertaining to the case (12 cases).
- Caseworker visits with parents occurred with sufficient frequency, but did not focus on substantive issues pertaining to the case (3 cases).
- Caseworker visits with parents were not occurring with sufficient frequency, but when they did occur they focused on substantive issues pertaining to the case (4 cases).
- There were no visits between the caseworker and the parents (1 case).

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the frequency and quality of caseworker visits with parents varies across children's service workers. Several stakeholders indicated that scheduling visits with parents is challenging for children's service workers because of their high caseloads.

**Determination and Discussion:** Item 20 was assigned an overall rating of Area Needing Improvement because in 43 percent of the applicable cases, reviewers determined that the frequency and/or quality of caseworker visits with both mothers and fathers were not sufficient to monitor the safety and well-being of the child or promote attainment of case goals.

According to the Statewide Assessment, children's service workers are required to visit parents in the home at least monthly. In addition, children's service workers are expected to have contact with parents during visitation and FST meetings. CD children's service workers are also required to have weekly phone contact with the family and on-going contact with other professionals working with the family.

## Well-Being Outcome 2

<b>Outcome WB2: Children receive appropriate services to meet their educational needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Jackson County</b>	<b>Jasper County</b>	<b>St. Louis County</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	17	6	5	28	80.0
Partially Achieved:	2	0	1	3	8.6
Not Achieved or Addressed:	2	0	2	4	11.4
Not Applicable:	3	6	6	15	



## STATUS OF WELL-BEING OUTCOME 2

Missouri did not achieve substantial conformity with Well-Being Outcome 2. This determination is based on the finding that the outcome was achieved in 80.0 percent of the cases reviewed, which does not meet the 90 percent required for substantial conformity.

Performance on this outcome varied across CFSR sites. The outcome was determined to be substantially achieved in 100 percent of Jasper County cases and 81 percent of Jackson County cases, compared to 62.5 percent of St. Louis County cases.

A key CFSR finding was that CD is not consistently effective in meeting children's educational needs, particularly children in the in-home services cases.

The findings for the item assessed for Well Being Outcome 2 are presented below.

### Item 21. Educational needs of the child

☐ Strength      ☒ Area Needing Improvement

**Review Findings:** An assessment of item 21 was applicable for 35 of the 50 cases reviewed. Cases that were not applicable for assessment were those in which the children were not of school age or were in their own homes and educational needs were not an issue. In assessing this item, reviewers were to determine whether children's educational needs were appropriately assessed and whether services were provided to meet those needs. The results of this assessment were the following:

- Item 21 was rated as a Strength in 28 (80%) of the 35 applicable cases (17 of the 28 cases were foster care cases).
- Item 21 was rated as an Area Needing Improvement in 7 (20%) of the 35 applicable cases (4 of the 7 cases were foster care cases).

Item 21 was rated as a Strength when reviewers determined that all potential educational needs were assessed and addressed as appropriate. The item was rated as an Area Needing Improvement when reviewers determined that there was clear evidence that the child had education-related service needs that were not being addressed by the agency. For example, in three in-home services cases, children were not attending school on a routine basis and the agency did not respond to this concern. In one foster care case, the child was suspended from school until January 2004 and the agency did not provide alternative education-related services.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that CD makes concerted efforts to meet children's educational needs, although placement changes often result in children having to change schools. State-level stakeholders

reported that there are 80 school-based social children's service workers in the State to address issues pertinent to children who have had contact with the child welfare agency. The social worker is an employee of the school district but CD pays 75 percent of the salary. Jackson County stakeholders reported that under the Consent Decree, the agency has hired an Educational Advocate for children in foster care and this has resulted in improved education-related services for these children.

***Determination and Discussion:*** Item 21 was assigned an overall rating of Area Needing Improvement because in 20 percent of the applicable cases, reviewers determined that CD had not made diligent efforts to meet children's educational needs. A key concern pertained to addressing truancy and educational neglect in the in-home services cases.

According to the Statewide Assessment, Missouri policy requires that specific educational information be collected on children in out-of-home care in order to document the child's grade level, individual education plan, special classes, extracurricular activities, and special achievements/honors. In addition, as part of the Consent Decree, Jackson County employs an Educational Advocate for children in out-of-home care. As indicated in the Statewide Assessment, Peer Record Review results found that children in alternative care were receiving the appropriate educational services 96 percent of the time during the last quarter of 2002.

The Statewide Assessment notes that foster parents are expected to serve as the representative surrogate parent for foster children with disabilities during the Individual Education Plan process and other educational activities. For children placed in residential care, it is the responsibility of the Department of Elementary and Secondary Education to appoint a representative.

Information in the Statewide Assessment notes that Missouri Senate Bill 757 strengthened the cooperation between CD and school districts by requiring each school district to identify a school liaison. Upon receipt of a Hotline referral, the assigned children's service worker is required to contact the designated school liaison as part of the investigation/assessment protocols.

### Well-Being Outcome 3

<b>Outcome WB3: Children receive adequate services to meet their physical and mental health needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Jackson County</b>	<b>Jasper County</b>	<b>St. Louis County</b>	<b>Total</b>	<b>Total Percentage</b>
Substantially Achieved:	16	11	8	35	71.4
Partially Achieved:	5	1	3	9	18.4
Not Achieved or Addressed:	2	0	3	5	10.2
Not Applicable:	1	0	0	1	

### STATUS OF WELL-BEING OUTCOME 3

Missouri did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 71.4 percent of the applicable cases, which is less than the 90 percent required for substantial conformity.

Performance on this outcome varied across CFSR sites. The outcome was determined to be substantially achieved in 92 percent of Jasper County cases, compared to 70 percent of Jackson County cases and 57 percent of St. Louis County cases.

The CFSR case reviews found that CD was not consistently effective in meetings children's physical and mental health needs. A particular concern pertained to the mental health needs of children in the in-home services cases. In many of those cases, reviewers determined that a mental health assessment and/or mental health services were warranted, but the agency did not respond.

Findings pertaining to the specific items assessed under Well-Being Outcome 3 are presented and discussed below.

#### Item 22. Physical health of the child

\_\_\_\_ Strength      \_\_X\_\_ Area Needing Improvement

**Review Findings:** An assessment of item 22 was applicable for 44 of the 50 cases reviewed. Cases that were not applicable for this assessment were in-home services cases in which physical health concerns were not an issue. In assessing this item, reviewers were to determine whether (1) children's physical health needs had been appropriately assessed; and (2) the services designed to meet those needs had been, or were being, provided. The findings of this assessment were the following:

- Item 22 was rated as a Strength in 36 (82%) of the 44 applicable cases (23 of the 36 cases were foster care cases).
- Item 22 was rated as an Area Needing Improvement in 8 (18%) of the 44 applicable cases (3 of the 8 cases were foster care cases).

Ratings for this item varied by type of case, with 88 percent of foster care cases rated as a Strength for the item compared to 72 percent of applicable in-home services cases. Ratings also varied across CFSR sites. The item was rated as a Strength in 91 percent of Jasper County cases and 85 percent of Jackson County Cases, compared to 69 percent of St. Louis County cases.

Item 22 was rated as a Strength when reviewers determined that children's health needs were routinely assessed and services were provided as needed. The item was rated as an Area Needing Improvement when reviewers determined that there was clear evidence of health-related needs that were not being addressed by the agency.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that CD is consistent in ensuring that the physical health needs of children in foster care are met, although they noted that in some areas of the State, it is difficult to find a dentist who will accept Medicaid. Jackson County stakeholders reported that there is a dental van that travels around the county to provide dental care. Stakeholders in this county also suggested that the consent decree has improved the county's ability to meet children's physical health needs and that having a medical unit has been helpful with cases in which a child has medical concerns.

***Determination and Discussion:*** Item 22 was assigned an overall rating of Area Needing Improvement based on the finding that in 18 percent of the applicable cases, reviewers determined that CD had not adequately addressed the health needs of children, particularly children in the in-home services cases. A key concern pertained to the lack of health services for all children in the family in the in-home services cases and a lack of sufficient dental services for children in foster care.

According to the Statewide Assessment, CD policy requires that an initial health exam for the child be held within 24 hours of coming into foster care (or as soon as possible), including a complete Healthy Child and Youth screening. If a medical provider is not readily accessible, this exam must occur within 10 days of the initial placement. Policy also requires children's service workers to ensure that medical information is obtained from the parent/physician and given to the foster parents within 72 hours of placement, if possible, and no later than 30 days.

The Statewide Assessment notes that placement providers must maintain a record of health care, especially immunization records, and cooperate with CD in arranging for routine medical and dental care and ensuring that children receive appropriate care during any illness.

The Statewide Assessment indicates that although Medicaid covers all children in out-of-home care, foster parents across the State have reported that it is difficult to locate dentists who will accept Missouri Medicaid. The CD has developed medical foster homes to care for medically fragile children in out-of-home care. This has helped to keep children in the community and out of institutions. Foster parents receive specialized training geared to the specific medical needs of the child.

As noted in the Statewide Assessment, Jackson County is required to collect data in regard to prevention as well as on-going health care for children in out-of-home placement. The County has a special database that was custom-built for the Consent Decree and serves as a model for the rest of the State. In addition, the County has a Medical Unit that is available to answer staff questions regarding any medical issue. Staff frequently contact the Medical Unit to obtain information on medications children are prescribed in order to determine side effects or safety risks to the child. The Medical Unit also is contacted about Medicaid, healthcare billing, and medical foster home questions.

For children from intact families, the children's parents are responsible for all health care. Through the Child Health Incentive Program, Missouri offers health insurance to families whose income is up to 300 percent of the poverty level.

Stakeholders expressed concern regarding how difficult it is to access medical services through an HMO or Medicaid when a child is placed in care or when a child switches placements. They reported that it can take up to 15 days to secure Medicaid coverage when a child moves from an area of the State that is covered by an HMO to an area that does not have a managed care provider. Conversely, if the child is originally covered by Medicaid and then needs to switch to an HMO, there are also delays. As reported by stakeholders, the State Medicaid office cannot process changes until the caseworker changes the child's placement location in the system, and there are frequent delays in entering this critical information.

### **Item 23. Mental health of the child**

☐ Strength      ☒ Area Needing Improvement

**Review Findings:** An assessment of item 23 was applicable for 40 of the 50 cases reviewed. Cases that were not applicable were those in which the child was too young for an assessment of mental health needs or in-home services cases in which mental health needs were not an issue. In assessing this item, reviewers were to determine whether (1) mental health needs had been appropriately assessed, and (2) appropriate services to address those needs had been offered or provided. The findings of this assessment were the following:

- Item 23 was rated as a Strength in 31 (77.5%) of the 40 applicable cases (18 of the 31 cases were foster care cases).

- Item 23 was rated as an Area Needing Improvement in 9 (22.5%) of the 40 applicable cases (3 of the 9 cases were foster care cases).

Item ratings differed as a function of case type. The item was rated as a Strength in 86 percent of the foster care cases compared to 68 percent of the in-home services cases. Ratings also varied across CFSR sites. The item was rated as a Strength in 100 percent of Jasper County cases, compared to 73 percent of Jackson County cases and 67 percent of St. Louis County cases.

Reviewers determined that children's mental health needs were "significantly" assessed in 31 cases, "partially" assessed in 3 cases, and "not at all" assessed in 6 cases. Reviewers determined that identified mental health service needs were "significantly met" in 31 cases, "partially met" in 5 cases, and "not at all met" in 4 cases.

Item 23 was rated as a Strength when reviewers determined that children's mental health needs were "significantly" or "partially" assessed, and mental health needs were significantly addressed when necessary. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Mental health needs were not fully assessed, although a mental health assessment was warranted (7 cases).
- Mental health needs were assessed but needed services were not provided (2 cases).

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that there are insufficient mental health services in many areas of the State to meet the needs of the children in foster care and in-home services cases. They noted that the child welfare agency has difficulty obtaining psychological services and substance abuse treatment services for children through the State mental health agencies. Specific concerns noted were a lack of qualified therapists who understand child abuse and neglect, a scarcity of services for dually diagnosed children, and a lack of services for children with mental retardation and developmental disabilities. However, most Jasper County stakeholders suggested that children in foster care and in-home services cases in that county have access to sufficient and high quality mental health services. In addition, State-level stakeholders reported that the System of Care initiative implemented in conjunction with the mental health agency is focused on providing mental health services to children with serious mental health concerns without bringing them into residential care.

**Determination and Discussion:** Item 23 was assigned an overall rating of Area Needing Improvement based on the finding that in 22.5 percent of the applicable cases, reviewers determined that CD had not made concerted efforts to address the mental health needs of children.

According to the Statewide Assessment, State policy requires that the children's service worker must ensure that children with serious emotional and behavioral needs receive appropriate counseling, therapy, and/or medication. Also, the worker must ensure that the

placement provider has the knowledge and skills necessary to provide appropriate care for the child. The Statewide Assessment also notes that the mental health system in Missouri has very limited resources for placing children in residential treatment. The new System of Care initiative has the goal of improving interagency coordination and better matching youth to the agency most suitable for their needs. To address this concern, CD has developed Behavioral Foster Care and Career Foster Care for children with behavioral and/or emotional problems. These foster parents receive payments that are more than the traditional foster care board rates but are less than the residential care rate.

The Statewide Assessment notes that access to mental health services for children remains an issue for intact families due to barriers of transportation, insurance, and lack of knowledge about the mental health system.